OJT Evaluation Questionnaire
To be completed by Employer

Company: __________________________________________

Name: ____________________________________________

Title: ____________________________________________

OJT Participant: ___________________________________

How important was the availability of OJT in the decision to hire this individual?

☐ Low  ☐ Moderate  ☐ High  ☐ Very High

How successful was the OJT program in getting the new hire up to speed for the position?

☐ Low  ☐ Moderate  ☐ High  ☐ Very High

How willing would you be to participate in another OJT project?

☐ Low  ☐ Moderate  ☐ High  ☐ Very High

How willing would you be to recommend this program to other employers?

☐ Low  ☐ Moderate  ☐ High  ☐ Very High

How would you rate the effectiveness of the OJT program and process overall?

☐ Low  ☐ Moderate  ☐ High  ☐ Very High

How would you rate the value of the OJT program to your business overall?

☐ Low  ☐ Moderate  ☐ High  ☐ Very High

Please provide any additional comments about the OJT program here:

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6/16/2011